

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number : 20130291		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: CITIZENS FOR JASON ORTITAY										
Street Address: 228 OSTOP ROAD										
City: BURGETTSTOWN				State: PA		Zip Code: 15021				
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2024	FILING METHOD ( ) CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
				MO	DAY	YEAR	REP			
				11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		3	5	2024		4	8	2024		
A. Amount Brought Forward From Last Report				\$ 27,398.75						
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 6,795.00						
C. Total Funds Available (Sum Of Lines A and B)				\$ 34,193.75						
D. Total Expenditures (From Schedule III)				\$ 12,926.33						
E. Ending Cash Balance (Subtract Line D From Line C)				\$ 21,267.42						
F. Value Of In-Kind Contributions Received (From Schedule II)				\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)				\$ 0.00						

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
CITIZENS FOR JASON ORTITAY	From: <u>3/5/2024</u> To: <u>4/8/2024</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 45.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 350.00
<b>All Other Contributions (Part B)</b>	\$ 300.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 650.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 6,100.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 6,100.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 6,795.00
---	-------------

**PART A**  
**CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**  
**\$50.01 TO \$250.00**

**Use this Part to itemize only contributions received from political committees  
with an aggregate value from \$50.01 to \$250.00 in the reporting period.**

<b>Name of Filing Committee or Candidate</b>  CITIZENS FOR JASON ORTITAY	<b>Reporting Period</b>  From: <u>3/5/2024</u> To: <u>4/8/2024</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><b>DATE</b></td> <td style="width: 40%; border: none;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b> AA PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 200 N. WYNNEWOOD AVE. A216			3	27	2024	
<b>City</b> WYNNEWOOD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19096				

<b>Full Name of Contributing Committee</b> HUMANE PA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 2984 SWEET GUM CIRCLE			4	7	2024	
<b>City</b> YORK	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17406				

**Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.**

<b>PAGE TOTAL</b>
\$ 350.00

**PART B**  
**ALL OTHER CONTRIBUTIONS**

**\$50.01 TO \$250.00**

**Use this Part to itemize all other contributions with an aggregate value from  
\$50.01 to \$250.00 in the reporting period.  
(Exclude contributions from political committees reported in Part A)**

<b>Name of Filing Committee or Candidate</b> CITIZENS FOR JASON ORTITAY	<b>Reporting Period</b> <b>From:</b> <u>3/5/2024</u> <b>To:</b> <u>4/8/2024</u>
--	--

				DATE			AMOUNT	
Full Name of Contributor RAYMOND FIORONI					MO	DAY	YEAR	\$ 100.00
Mailing Address 202 QUEENS STREET					2	20	2024	
City CANONSBURG		State PA	Zip Code (Plus 4) 15317					

Full Name of Contributor				MO	DAY	YEAR	\$	200.00
MICHAEL WARD								
Mailing Address								
206 JACOBS WAY								
City		State	Zip Code (Plus 4)	3	29	2024		
GREENSBURG		PA	15601					

**Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.**

<b>PAGE TOTAL</b>
\$ 300.00

# PART C

## Contributions Received From Political Committees

### OVER \$250.00

**Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.**

<b>Name of Filing Committee or Candidate</b>  CITIZENS FOR JASON ORTITAY	<b>Reporting Period</b>  <b>From:</b> <u>3/5/2024</u> <b>To:</b> <u>4/8/2024</u>
--	--

				DATE		AMOUNT	
Full Name of Contributing Committee FRIENDS OF MARTINA WHITE				MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 16041				3	29	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19154					
Full Name of Contributing Committee GGR INC. PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 212 LOCOUST ST. SUITE 300				4	7	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee PA OPTOMETRIC PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 218 NORTH ST.				4	7	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee PA AMERICAN WATER PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 852 WESLEY DR.				4	7	2024	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055					
Full Name of Contributing Committee CHAMBER PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 417 WALNUT ST.				4	7	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					

Full Name of Contributing Committee PURSUIT PAC			MO	DAY	YEAR	\$ 300.00
Mailing Address 2311 YALE AVE.			4	7	2022	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011				
Full Name of Contributing Committee JM ULIANA AND ASSOCIATES LLC			MO	DAY	YEAR	\$ 300.00
Mailing Address 2571 BAGLYOS CIRCLE B20			4	7	2024	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18020				
Full Name of Contributing Committee PGG - STATE PAC			MO	DAY	YEAR	\$ 300.00
Mailing Address 2 NORTH NINTH ST.			4	7	2024	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18101				
Full Name of Contributing Committee PA TRUCK PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 910 LINDA LANE			4	7	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011				
Full Name of Contributing Committee PSEA PACE			MO	DAY	YEAR	\$ 500.00
Mailing Address 400 NORTH THIRD ST. PO BOX 1724			4	7	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17105				
Full Name of Contributing Committee RANGE RESOURCES ENERGY INDEPENDENCE PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 545			4	7	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108				

Full Name of Contributing Committee DUQUENSE LIGHT PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 411 7TH AVE. FL 7			4	7	2024	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219				

Full Name of Contributing Committee PAA PAC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1925 N. FRONT ST. PO BOX 2955			4	7	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17105				

Full Name of Contributing Committee PA BANKERS PUBLIC AFFAIRS COMMITTEE			MO	DAY	YEAR	\$ 500.00
Mailing Address 3897 NORTH FRONT ST.			4	7	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110				

**Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.**

<b>PAGE TOTAL</b>
\$ 6,100.00

**PART D**  
**ALL OTHER CONTRIBUTIONS**  
**OVER \$250.00**

Use this Part to itemize all other contributions with an aggregate value of  
over \$250.00 in the reporting period.  
(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	Reporting Period
	From: <span style="float: right;">To:</span>

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name			Occupation	
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 0.00



PART E  
**OTHER RECEIPTS**

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

<b>PAGE TOTAL</b>
\$ 0.00

## SCHEDULE II

**IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS  
DURING THE REPORTING PERIOD.**

**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
CITIZENS FOR JASON ORTITAY		From: <u>3/5/2024</u> To: <u>4/8/2024</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	0.00

**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
---------------------------------------	--

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

**SCHEDULE II**  
**PART G**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OVER \$250.00**

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
CITIZENS FOR JASON ORTITAY	From <u>3/5/2024</u> To: <u>4/8/2024</u>

DATE				AMOUNT
<b>To Whom Paid</b> AMAZON	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 13455 NOEL ROAD	1	4	2024	\$ 167.12
<b>City</b> DALLAS	<b>State</b> TX	<b>Zip Code (Plus 4)</b> 75240	<b>Description of Expenditure</b> INK	
<b>To Whom Paid</b> USPS	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 1620 SMITH TOWNSHIP STATE ROAD	1	19	2024	\$ 9.35
<b>City</b> ATLASBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15004	<b>Description of Expenditure</b> POSTAGE	
<b>To Whom Paid</b> WASHINGTON CITY MISSION	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 84 W. WHEELING ST.	1	22	2024	\$ 250.00
<b>City</b> WASHINGTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15301	<b>Description of Expenditure</b> DONATION	
<b>To Whom Paid</b> LA BELLA BEAN	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 1900 MAIN ST.	1	26	2024	\$ 120.00
<b>City</b> CANONSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15317	<b>Description of Expenditure</b> FOOD	
<b>To Whom Paid</b> TRUE FIT MARKETING	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 1000 HORIZON VUE DR.	1	22	2024	\$ 275.00
<b>City</b> CANONSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15317	<b>Description of Expenditure</b> WEBSITE	

To Whom Paid TREVOR POPECK FOUNDATION			MO	DAY	YEAR	\$ 250.00
Mailing Address P.O. BOX 127			1	31	2024	
City MEADOW LANDS	State PA	Zip Code (Plus 4) 15347	Description of Expenditure DONATION			

To Whom Paid MCDONALD FIRE DEPARTMENT			MO	DAY	YEAR	\$ 500.00
Mailing Address 150 NORTH MCDONALD ST.			1	31	2024	
City MCDONALD	State PA	Zip Code (Plus 4) 15057	Description of Expenditure DONATION			

To Whom Paid FOAC - ILLEA			MO	DAY	YEAR	\$ 300.00
Mailing Address 1316 LINDBERGH AVE.			1	31	2024	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15223	Description of Expenditure DONATION			

To Whom Paid PA DEPARTMENT OF STATE			MO	DAY	YEAR	\$ 100.00
Mailing Address 1101 SOUTH FRONT ST.			2	9	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17104	Description of Expenditure FILING FEE			

To Whom Paid RGB POLITICS			MO	DAY	YEAR	\$ 375.00
Mailing Address 3031 LOGAN ST.			2	14	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure MARKETING			

To Whom Paid RGB POLITICS			MO	DAY	YEAR	\$ 513.00
Mailing Address 3031 LOGAN ST.			2	20	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure MARKETING			

To Whom Paid TOP GOLF			MO	DAY	YEAR	\$ 1,061.72
Mailing Address 400 PRESTO SYAN RD.			2	23	2024	
City BRIDGEVILLE	State PA	Zip Code (Plus 4) 15017	Description of Expenditure DEPOSIT			
To Whom Paid TRUE FIT MARKETING			MO	DAY	YEAR	\$ 275.00
Mailing Address 1000 HORIZON VUE DR.			2	22	2024	
City CANONSBURG	State PA	Zip Code (Plus 4) 15317	Description of Expenditure WEBSITE			
To Whom Paid RGB POLITICS			MO	DAY	YEAR	\$ 1,375.88
Mailing Address 3031 LOGAN ST.			2	23	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure SIGNS			
To Whom Paid FRIENDS OF RUSS DIAMOND			MO	DAY	YEAR	\$ 500.00
Mailing Address 305 WEST SHERIDAN AVE.			2	29	2024	
City ANNVILLE	State PA	Zip Code (Plus 4) 17083	Description of Expenditure DONATION			
To Whom Paid GREATER CANONSBURG CHAMBER			MO	DAY	YEAR	\$ 100.00
Mailing Address 68 EAST PIKE ST. SUITE 104			3	5	2024	
City CANONSBURG	State PA	Zip Code (Plus 4) 15317	Description of Expenditure DONATION			
To Whom Paid CAFE FRESCO			MO	DAY	YEAR	\$ 1,028.00
Mailing Address 215 N. 2ND ST.			3	20	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure FOOD			

<b>To Whom Paid</b> SOUTH FAYETTE MINI THON			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 900.00
<b>Mailing Address</b> 3660 OLD OAKDALE RD.			3	22	2024	
<b>City</b> MCDONALD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15057	<b>Description of Expenditure</b> DONATION			

  

<b>To Whom Paid</b> TRUE FIT MARKETING			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 4,750.00
<b>Mailing Address</b> 1000 HORIZON VUE DRIVE			3	25	2024	
<b>City</b> CANONSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15317	<b>Description of Expenditure</b> DESIGN / ADS			

  

<b>To Whom Paid</b> STAPLES			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 74.79
<b>Mailing Address</b> 6521 STEUBENVILLE PIKE			4	3	2024	
<b>City</b> PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15205	<b>Description of Expenditure</b> PRINTING			

  

<b>To Whom Paid</b> RAISE THE MONEY			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1.47
<b>Mailing Address</b> PO BOX 26466			3	27	2024	
<b>City</b> LITTLE ROCK	<b>State</b> AR	<b>Zip Code (Plus 4)</b> 72221	<b>Description of Expenditure</b> FEE			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 12,926.33



